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terreby revoke all previous powers of attorney given in the application identified in the attached statement under CFR 3.73(b).  Practitioners associated with the Customer Number:  OR  Practitioners associated with the Customer Number:  OR  Practitioners associated with the Customer Number:  OR  Name  Registration  Name  Registration Number  Name  Registration Number  Name  Registration Number  Number  Number  Number  Name  Registration Number  Number  Number  Number  Name  Registration Number  Number  Name  Registration Number  Number  Number  Name  Registration Number  Number  Number  Number  Name  Registration Number  Number  Name  Registration Number  Number  Number  Name  Registration Number  Number  Name  Registration Number  Number  Name  Registration Number  Number  Name  Registration Number  Number  Number  Name  Registration Number  Number  Number  Number  Number  Name  Registration Number  Numb	POWE	R OF ATTORNEY TO PRO	SECUTE APP	LICATIONS BE	FORE THE L	JSPTO
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Practitioners associated with the Customor Number:  OR  Prectitioner(a) named below (if more than ten patent practitioners are to be named, then a customer number must be used):  Name  Registration Number						
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Precitioner(a) named below (if more than ten patent pracitioners are to be named, then a customer number must be used):    Name	Practitions	rs associated with the Customer Number:		03775		
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Assignee Name and Address:  ADKNOWLEDGE, INC.  4600 Madison Avenue, 10 <sup>th</sup> Floor  Kansas City, MO 64112  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/88 or equivalent) is required to a statement under 37 CFR 3.73(b) and must identify the application in which this Power of Attorney is to be filed.  Signature  Mignited R. Geroe  Mignature  Mignited R. Geroe  Telephone  Assignee Name and Address:  ADKNOWLEDGE, INC.  4600 Madison Avenue, 10 <sup>th</sup> Floor  Kansas City, MO 64112  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/88 or equivalent) is required to a filed in each application in which this form is used. The statement under 37 CFR 3.73(b) application in which this Power of Attorney is to be filed.  Signature  Mignited R. Geroe  Telephone B16-931-182		Name		Nam	10	
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The address essociated with Customer Number: 0.3775  OR  Imm or Individual Name Address  City  State  Zip  Country  Telaphone  Assignes Name and Address:  ADKNOWLEDGE, INC. 4600 Madison Avenue, 10th Floor Kansas City, MO 64112  A copy of this form, together with a statement under 37 GFR 3.73(b) (Form PTO/SB/38 or aquivalent) is required to the practitioners appointed in this form is used. The statement under 37 GFR 3.73(b) may be completed by one the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  Signature  Date 1/4/2010  Telaphone 816-931-182	ny and all pate tached to this	nt applications essigned only to the understorm in accordance with 37 CFR 3.73(b).	algned according to th	e USPTO easignment n	cords of Basigrimer	nt decuments
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Individual Name Address  City  State  Zip  Country  Telaphone  Assignes Name and Address:  ADKNOWLEDGE, INC.  4600 Madison Avenue, 10th Floor  Kansas City, MO 64112  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/98 or aquivalent) is required to a filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.  Signature  Signature  Signature  Date 1/4/2010  Telaphone 816-931-182						
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Signature  Mightel R. Geroe  Attorney is to be filed.  BIGNATURE of Assignee of Record  The ladividual whose signature and attle is supplied below is authorized to act on behalf of the sasignee  Date 1/4/2010  Telephone 816-931-182	filed in each	application in which this form is u	sed. The statemen	nt under 37 CFR 3.73	3(b) may be com	plated by one
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Title daylary arms 1	Name	Mighael R. Geroe			Telephone B16-	931-1826
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This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or relatin a banetit by the public which is to less by the USPTO by shocked, an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.31 and 1.14. This collection is estimated to take 3 minutes to complete, including githering, propering, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of sine you require to complete this form and/or suggestions for reducing this turden, should be sent to the Chief information Officer.
U.S. Patent and Tradement Office, U.S. Department of Comments, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.